Author's response to reviews

Title: Hospitalisation for rotavirus gastroenteritis in the paediatric population in the Veneto Region, Italy

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Title: Hospitalisation for rotavirus gastroenteritis in the paediatric population in the Veneto Region, Italy.

We are resubmitting the above-mentioned manuscript. We are grateful for the review, and your comments have resulted in a substantial improvement in the report. Please find the revised version and a point-by-point response to the reviewer’s remarks.

As suggested, result and discussion are now two separate sections.

The discussion had been corrected according to the points raised by Reviewer 1 as well as a general discussion of how our findings compare and contrast to those found previously.

Potential strategies for improving RV programs for children in Italy are included as suggested by Reviewer 1.

Also the minor revisions were taken in to account and corrected as requested.

No ethics committee approval was needed. The data collected in the study were retrospective and were retrieved from pre-existing databases released directly
from the Veneto Region, according to the national and international rules concerning the clinical research, notification of the study to the Ethics Committees was not applicable nor was informed consent of patients required. The data were anonymous and Patients' privacy was secured by the Veneto Region in accordance with legal requirements.

The aims of our study are included within the background section of the abstract.

Reviewer 1:

• The manuscript examines rotavirus gastroenteritis hospital admissions and costs in several hospitals not just in one, covering both public and private sectors. Although it analyses a regional population, according to the epidemiological data retrieved from the Regional Office for Statistics, the overall number of residents in Veneto Region in 2008 was 4,885,548

• In Italy the vaccination programme does not include rotavirus universal vaccination for newborns and assessing the burden of the disease and related cost is fundamental for the process of decision making.

• Thank you for underlying the fusion of two sections: now Results and Discussion are separated in two different sections.

• Our retrospective population-based study was conducted analysing data collected from the hospital discharge database (HDD) of the Veneto Region, covering the 100% of discharges from all hospitals. The data were acquired in electronic form and were anonymous.

• Temperature can vary broadly in Europe within the same month depending on the latitude, therefore to facilitate data comparison the mean average temperature by month was reported.

• The hospitalisation-related costs were estimated through DRG (Diagnosis Related Group) reimbursement rates and reported in the Results section.

• Strengths and limitations of the study were detailed in the Discussion section as suggested.

• Potential strategies to provide vaccination rotavirus for children in Italy are discussed.

Reviewer 2:

• Thank you for pointing the type error. We have changed 3,15 to 3,150 (table 1, column 2, line 7).
• Comments on the economic value of RV infection as well as a more detailed analysis of costs of RV-related hospitalisations have been added.

• an in-depth discussion comparing data reported in this study and previous at regional and national level in Italy finding has been added